PART B - FEE(S) TRANSMITTAL

Complete and send this form, together what applicable fee(s), to: Mail Mail Stop ISSUL FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correct maintenance fee notifications.	ed below or directed oth	ng the Patent, advance of herwise in Block 1, by (a	rders and notification of a) specifying a new co	of m rresp	pondence address;	ill be m and/or (ailed to the current b) indicating a sepa	correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
441	7590 12/22		nave			_			
	BRELL & RUSS TICUT AVENUE, 1 I, DC 20036		·	here State addre rans	Cert eby certify that this s Postal Service wi essed to the Mail mitted to the USPT	ificate o s Fee(s) ith suffic Stop IS O (571)	If Mailing or Trans Transmittal is being cient postage for firs SUE FEE address 273-2885, on the d	mission the deposited with the United the class mail in an envelope above, or being facsimile ate indicated below.	
								(Depositor's name)	
								(Signature)	
								(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	ENTOR ATTOR		NEY DOCKET NO.	CONFIRMATION NO.		
10/591,609 09/05/2006 TITLE OF INVENTION: SILANISED SILICAS		Jurgen Meyer				0	3090		
			F	1				,	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	_	\$0		\$1810	03/22/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS						
LOEWE, ROBERT S 1. Change of correspondence address or indication		1796	428-404000 2. For printing on the patent front page, list						
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 Smith, Gambrell & and Russell, LLP						
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON T	THE PATENT (print or	type	;)	-			
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI		ified below, no assignee pletion of this form is NO						ocument has been filed for	
DeGussa AG			(B) RESIDENCE: (CITY and STATE OR COUNTRY) GERMANY						
Deddssa A			GERMANI						
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	<u> </u>	Individual XXI Cor	poration	or other private gro	up entity Government	
4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).						
5. Change in Entity Sta	tus (from status indicated	i above)	overpayment, to De	posi	it / secount inumber		(choose at	i chua copy of this form).	
a. Applicant claim	s SMALL ENTITY statu	s. See 37 CFR 1.27.	☐ b. Applicant is no	_				(6)()	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if requ records of the United Sta	aired) will not be accepted tes Patent and Trademark	l from anyone other that Office.	n the	e applicant; a regist	tered atto	orney or agent; or the	e assignee or other party in	
Authorized Signature			Date March 22, 2010						
Typed or printed name Thomas G. Wiseman			Registration No. 35,046						
an application. Confiden submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 C tiality is governed by 35 d application form to the ons for reducing this bur iriginia 22313-1450. DO 13-1450. duction Act of 1995, no page 1995	U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR (1.14. This collection is depending upon the income Chief Information Off COMPLETED FORMS	estir divid ficer, TO	nated to take 12 midual case. Any com, U.S. Patent and T THIS ADDRESS.	inutes to nments of rademar SEND T	o complete, including on the amount of tink of Office, U.S. Depa ΓΟ: Commissioner f	by the USPTO to process) g gathering, preparing, and he you require to complete rtment of Commerce, P.O. or Patents, P.O. Box 1450,	

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.